

DAWN Live! for EDs: Data on Demand

WHAT IS DAWN Live!

DAWN *Live!* is a secure, Internet-based application that allows authorized employees at a participating hospital to build tables with real-time, de-identified data on drug-related emergency department (ED) visits submitted for their facility.

A demonstration version of DAWN *Live!* is available at https://demo.dawninfo.net/login.asp

"We joined DAWN because it offered important benefits for our hospital. One benefit is DAWN Live! to help with quality assurance. And, we can use DAWN information to work with our community."

— New York hospital administrator

WHAT DATA ARE AVAILABLE

Authorized hospital staff can use DAWN *Live!* to monitor the types of drug-related visits being treated in their ED, the drugs involved in these visits, and the characteristics of the patients and of the ED visit. The ED visit data can be broken out by month, half-year or year, dating back to when the hospital joined DAWN.

Staff who use DAWN *Live!* have access to the data in "real-time." Since all DAWN cases are reported electronically, they are immediately available via DAWN *Live!*

In addition to the hospital's own ED data, users will also have access to the data submitted by all the hospitals in the U.S. that participate in DAWN. Additionally, they will be able to compare their own hospital's data to the aggregated DAWN data for their metropolitan area if at least four hospitals in their metropolitan area are reporting to DAWN. Some examples of information that can be obtained through DAWN *Live!* are shown on the back of this sheet.

HOW IS IT USED

Most authorized users track their drug-related ED cases on a regular basis. For example,

- A Medical Safety Officer is using DAWN Live! to identify the drugs associated with adverse reactions in her hospital's ED. She shares the de-identified results monthly with other ED staff to improve patient care.
- In one community hospital, the ED Director is tracking cases involving methamphetamine use through DAWN Live! She is working with other community leaders to develop prevention strategies.

WHO CAN USE DAWN Live!

Once a hospital has agreed to participate in DAWN, the administrator can designate clinicians, managers, and researchers to become DAWN *Live!* users. Each user is assigned a user ID and password by Westat and is trained on how to use DAWN *Live!*

All authorized users must agree to observe confidentiality restrictions required by Federal law. The hospital's data can only be viewed by its designated staff and authorized DAWN project staff.

To illustrate how hospitals use DAWN *Live!*, the back of this sheet shows some typical queries. The person who conducts the DAWN *Live!* training in each hospital will show users how to perform these queries. If Excel is available, users will learn how to send the data into Excel, to create graphs and charts.

(continued on back)

For more information: If you have questions, please call Westat at **800-FYI-DAWN.** Information about DAWN is also available online at **http://DAWNinfo.samhsa.gov**.

EXAMPLES FROM DAWN Live!

The following examples were created for a fictitious hospital, Central Hospital, using its own data from DAWN *Live!*Central Hospital is located in the suburbs of a major city and treats approximately 88,000 ED visits each year. The DAWN

Case Reports for Central Hospital are complete for 2006 and up to date for 2007. The results of a DAWN *Live!* query can be saved in Excel (a standard option), for easy transformation into tables or charts.

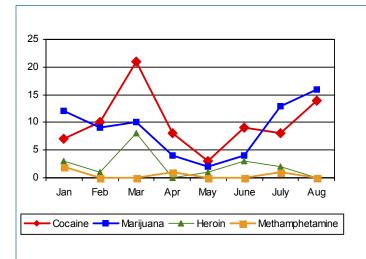
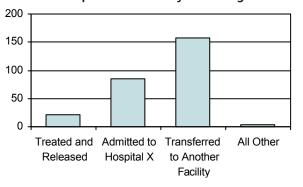


Figure 1. Heroin, Cocaine, Marijuana, and Methamphetamine Reports in ED Visits: January-August 2007

Central Hospital uses DAWN to track the involvement of illicit drugs in its ED. The most frequent illicit drug is cocaine, followed by marijuana. Both cocaine and marijuana appeared to be increasing in the summer months. Methamphetamine is present, but in very small numbers.

Central Hospital uses DAWN *Live!* to monitor the outcomes of drug-related ED visits. An ED visit can be an important intervention point for suicide prevention, so Central Hospital looks at the disposition of the patients whose drug-related suicide attempts were treated in the ED. Of the 268 visits from January 2006 to August 2007, over half of the patients were transferred to another health care facility. Central Hospital admitted 85 patients and released 22 patients from the ED. Central Hospital chose to group the ED visits into 4 disposition categories for this chart, but more detailed categories are available in DAWN *Live!*

Figure 2. Drug-Related Suicide Attempts, by Patient Disposition: January 2006-August 2007



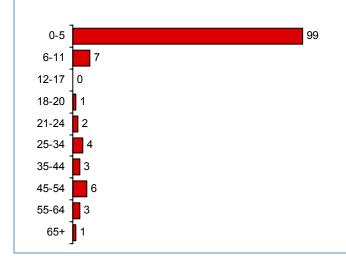


Figure 3. Accidental Poisonings, by Age Group: January 2006-August 2007

Central Hospital's staff members use data from DAWN *Live!* for their work with the local health department on a campaign to prevent childhood poisonings by educating parents about drug safety. DAWN *Live!* shows that the typical accidental poisoning ED visit in the last 18 months involved a child between the ages of 0 and 5.